2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT #A97000001035

1. Entity Name

RETLAW LIMITED PARTNERSHIP

FILED Apr 12, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

800 SNUG ISLAND

CLEARWATER, FL 33767-1833

800 SNUG ISLAND CLEARWATER, FL 33767-1833



DO NOT WRITE IN THIS SPACE

04092007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-3446374

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RENALT CORPORATION 808 SNUG ISLAND CLEARWATER, FL 33767-1833

DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
	the obligations of registered agent.

PH P MOWIE PER 10 0500 OF

Signature, typed or printed name of registered egent and title if applicable

DATE

FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

	NOTE: General Partners MAY NOT be changed on ti	ne
12.	GENERAL PARTNER INFORMATION	
DOCUMENT #	P97000040561	
NAME	RENALT CORPORATION	1
STREET ADDRESS	800 SNUG ISLAND	ı
CITY-ST-ZIP	CLEARWATER, FL. 337671833	1
DOCUMENT #		
NAME		Ì
STREET ADDRESS		
CITY-ST-ZIP		
DOCUMENT #		
NAME		
STREET ADDRESS		

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DO NOT WRITE IN THIS SPACE

CITY-ST-ZIP

DOCUMENT / NAME

STREET ADDRESS
CITY-ST-ZIP

14 | December Continue the information supplied with this filling door not qualify for the exampliance contained in Chapter 119. Florida Statutes | further or

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

CITY-SI-7IP

DOCUMENT #

STREET ADDRESS
CITY-ST-ZIP
DOCUMENT

STREET ADDRESS

SGRATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/7/07

727 4// /9/9

Date

Daytime Phone #